

## Form CPF M 102: Campaign Finance Report Municipal Form

GLOUCESTER, MA

Office of Campaign and Political Finance

of Massachusetts	File with: City on Town Clock on Floring Commission					
Litt. D Lord Out C.	File with: City or Town Clerk or Election Commission    2   1   4   Ending Date:   12   3   / 1   7					
Type of Report: (Check one)						
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution					
Valerie H. Gilman  Candidate Full Name (if applicable)  Ward 4 City Councilor  Office South and District  75 Revere 5treet Clovestutt  Residential Address  Committee to Elect Valence Gramme  Phone # (optional):  Phone # (optional):  Committee to Elect Valence Gramme  Committee to Elect Valence Gramme  Committee Name  Committee Name  Paul Gilman  Committee Treasurer  75 Revere 5treet Glovestatt  Committee Name  Phone # (optional):  Phone # (optional):						
SUMMARY BALANCI	E INFORMATION:					
Line 1: Ending Balance from previous report	6.60					
Line 2: Total receipts this period (page 3, line 11)	150.00					
Line 3: Subtotal (line 1 plus line 2)	15660					
Line 4: Total expenditures this period (page 5, line	: 14)					
Line 5: Ending Balance (line 3 minus line 4)	156.60					
Line 6: Total in-kind contributions this period (page	ge 6) O					
Line 7: Total (all) outstanding liabilities (page 7)	788.89					
Line 8: Name of bank(s) used: Cape Ann Saving's Bank						
Affidavit of Committee Treasurer:  I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind of finance activity of all persons acting under the authority of on behalf of this committee in a Signed under the penalties of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box  Candidate with Committee and no activity independent of the committee  I certify that I have examined this report including attached schedules and it is, to the bactivity, of all persons acting under the authority or on behalf of this committee in accommittee and plain in the pendent activity filing sep.  Candidate without Committee OR Candidate with independent activity filing sep.  I certify that I have examined this report including attached schedules and it is, to the bactivity that I have examined this report including attached schedules and it is, to the bactivity that I have examined this report including attached schedules and it is, to the bactivity, including contributions, loans, receipts, expenditures, disbursements, campaign finance activity of all persons acting under the authority or on behalf of this	cordance with the requirements of M.G.L. c. 55.  (Treasurer's signature)  Date:  (Treasurer's					
Signed under the penalties of perjury:	(Candidate's signature) Date: //22/18					

## SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Name and Residential Address  Occupation & Employer						
Date Received	(alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)			
11/14	Mac Bell Doliver : 5 Neck MA 01930					
ine 9: Total Receipt	ts over \$50 (or listed above)	100.00				
ine 10: Total Receip	ets \$50 and under* (not listed above)	50.00				
	CCEIPTS IN THE PERIOD	150.00	← Enter on page 1, line 2			
f you have itemized re	eceipts of \$50 and under, include them in line	0 I in a 10 -1 - 1	1' 1 1 1			

If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

## **SCHEDULE D: LIABILITIES**

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount	
10/16/15	Paul + Val Gilmon	75 Revere St Glovesky MA01930	Personal Loan	788.89	
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)					